

## FEE TRANSMITTAL

Electronic Version v10

Stylesheet Version v10

| Title of Invention   | PRIVACY ASSURANCE FOR PORTABLE COMPUTING  |           |             |                 |          |           |             |   |      |     |     |
|--|---|-----------|-------------|-----------------|----------|-----------|-------------|---|------|-----|-----|
| Application Number :   | 09/803290  |           |             |                 |          |           |             |   |      |     |     |
| Date :   | 2001-03-09  |           |             |                 |          |           |             |   |      |     |     |
| First Named Applicant:   | Shimon Shmueli  |           |             |                 |          |           |             |   |      |     |     |
| Attorney Docket Number:  | 4989-008  |           |             |                 |          |           |             |   |      |     |     |
| Art Unit:  | 2135  |           |             |                 |          |           |             |   |      |     |     |
| Examiner :   | Paula W. Klimach  |           |             |                 |          |           |             |   |      |     |     |
| <b>TOTAL FEE AUTHORIZED \$ 180</b>   |   |           |             |                 |          |           |             |   |      |     |     |
| Patent fees are subject to annual revisions on or about October 1st of each year.  |   |           |             |                 |          |           |             |   |      |     |     |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table> |   |           |             | Fee Description | Fee Code | Amount \$ | Fee Paid \$ | Submission Of Information Disclosure Stmt Fee | 1806 | 180 | 180 |
| Fee Description  | Fee Code  | Amount \$ | Fee Paid \$ |                 |          |           |             |   |      |     |     |
| Submission Of Information Disclosure Stmt Fee  | 1806  | 180       | 180         |                 |          |           |             |   |      |     |     |

### AUTHORIZED BILLING INFORMATION

**The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:**

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Expiration Date (YYYYMMDD): 2007-04-30  
Authorized name: Benjamin S. Withrow  
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